



## State of Utah

JON M. HUNTSMAN, JR.  
*Governor*

GARY R. HERBERT  
*Lieutenant Governor*

## Administrative Services

KIMBERLY K. HOOD  
*Executive Director*

## Office of State Debt Collection

DAVID JOHNSON III  
*Division Director*

### AUTHORITY FOR THE AUTOMATIC CREDIT/DEBIT CARD CHARGE

I (we) hereby authorize the State of Utah, Office of State Debt Collection (OSDC) to charge the account described below (the "Account") at the frequency and in the amounts stated; until the debt is paid in full. I (we) authorize the credit / debit card company at which the Account is maintained to accept the debit initiated by OSDC and to debit the Account as instructed by OSDC. As to the regularly scheduled payments due OSDC, I (we) authorize the credit/debit card company named below to debit the Account monthly in the amount of \$ \_\_\_\_\_. This agreement may be terminated only with written authorization of OSDC, payment in full of the debt; or written notice from the credit /debit card holder at least ten (10) days prior to the payment date. I (we) guarantee that I (we) are authorized signatories on the Account and have the legal right to conduct any and all business on the Account. I (we) also understand that I am (we are) ultimately responsible for each and every payment due to OSDC. If a problem occurs with the credit/debit card debit process, it is my (our) responsibility to make a payment to OSDC by money order in a timely manner.

#### The "ACCOUNT" information:

**Credit/Debit Card Company** \_\_\_\_\_

☐ Debit card    ☐ Visa    ☐ Mastercard    ☐ Discover  
Mark **only one** box

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Security Code from back of card \_\_\_\_\_

Regularly scheduled payments of \$ \_\_\_\_\_ per \_\_\_\_\_ beginning on \_\_\_\_\_.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

NAME ON CARD : \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE (MM/DD/YY): \_\_\_\_\_